

EMERGENCY VEHICLE INSPECTION FORM

FIRE DEPARTMENT: _____ FDID: _____ PHONE: _____

1. Brake System																
2. Coupling System																
3. Exhaust System																
4. Fuel System																
5. Lighting Devices																
6. Steering Mechanism																
7. Suspension																
8. Frame																
9. Tires																
10. Wheels & Rims																
11. Electrical System																
Date Performed:																
<p>I, _____, Chief of _____ Fire Department, do hereby certify that the above inspections were performed in accordance with K.A.R. 22-22-1 for the calendar year _____.</p> <p>_____ Fire Chief Signature</p> <p>____/____/____ Date</p>																